

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No. 241318US2	
	First Inventor or Application Identifier Kazunori BANNAI	
	Title COLOR SHIFT CORRECTING METHOD, OPTICAL WRITING DEVICE AND IMAGE FORMING APPARATUS	
	Assignee Name: Assignee Address:	

03916 U. S. PTO
10/644007

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRESS TO:	Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)		ACCOMPANYING APPLICATION PARTS	
2. <input checked="" type="checkbox"/> Specification	Total Sheets	97	
3. <input checked="" type="checkbox"/> Formal Drawing(s) (35 U.S.C. 113)	Total Sheets	29	
4. <input type="checkbox"/> Oath or Declaration	Total Pages	<input type="checkbox"/>	
a. <input type="checkbox"/> Newly executed (original or copy)			
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)			
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).			
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)			
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			
a. <input type="checkbox"/> Computer Readable Form (CRF)			
b. Specification or Sequence Listing on :			
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or			
ii. <input type="checkbox"/> Paper			
c. <input type="checkbox"/> Statements verifying identity of above copies			
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:			
<input type="checkbox"/> Continuation		<input type="checkbox"/> Divisional	
<input type="checkbox"/> Continuation-in-part (CIP)		of prior application no.:	
Prior application information:		Examiner: _____	
		Group Art Unit: _____	
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
18. Amend the specification by inserting before the first line the sentence:			
<input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP)			
of application Serial No. _____		Filed on _____	
<input type="checkbox"/> This application claims priority of provisional application Serial No. _____ Filed _____			
19. CORRESPONDENCE ADDRESS			
 22850 (703) 413-3000 FACSIMILE: (703) 413-2220			

Name:	Gregory J. Maier	Registration No.:	25,599
Signature:		Date:	8/20/07
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Docket No. 241318US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Kazunori BANNAI, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: COLOR SHIFT CORRECTING METHOD, OPTICAL WRITING DEVICE AND IMAGE FORMING APPARATUS

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	36 - 20 =	16	x \$18 =	\$288.00
INDEPENDENT CLAIMS	5 - 3 =	2	x \$84 =	\$168.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
			BASIC FEE	\$750.00
			TOTAL OF ABOVE CALCULATIONS	\$1,336.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
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Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.



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Date: 8/20/03



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